

JURISDICTION
300
 TRAVEL TIME: 90
 INSPECTION TIME: 45

SOUTHEASTERN DISTRICT HEALTH DEPARTMENT
 465 MEMORIAL DRIVE
 POCATELLO, ID

PM, GW
 FEE PD Y N
 PERMIT # 85023

****APPLICATION AND PERMIT VALID FOR ONE YEAR FROM DATE OF ISSUANCE**

NAME <u>Gordon Jensen</u>		PHONE <u>237-6889</u>	PROPERTY ADDRESS <u>Buffalo Rd.</u>	
MAILING ADDRESS:		LEGAL DESCRIPTION: LOT SIZE (ACRES) <u>1.5</u>		
STREET/P.O. BOX <u>7736 Sandpiper</u>		¼ SECTION <u>SE</u> SECTION <u>2</u> TOWNSHIP <u>6S</u> RANGE <u>34E20N</u>		
CITY <u>Pocatello</u>		LOT # _____ BLOCK # _____ SUBDIVISION _____		
STATE <u>ID</u> ZIP <u>83201</u>		PARCEL # <u>R385 300 2001</u> FROM TAX ASSESSOR'S OFFICE		
SEPTIC TANK SIZE <u>1000</u> gal.	EST TYPE <u>232</u>	EFFECTIVE DISPOSAL AREA <u>667</u> SQ.FT.	SOIL TYPE <u>B2</u>	MAXIMUM DEPTH BELOW GROUND SURFACE <u>4feet</u>
				# BEDROOMS <u>4</u>

INSTALLATION MUST BE BY LICENSED SEWER INSTALLER OR HOME/LANDOWNER

EHS SIGNATURE <u>Steve J. Row</u>	EHS # <u>69</u>	APPLICANT SIGNATURE <u>A. Gordon L. Jensen</u>	DATE <u>6-20-54</u>
REMARKS			

INSPECTION

THE DISTRICT HEALTH DEPARTMENT SHALL BE NOTIFIED OF INSTALLATION 48 HOURS PRIOR TO INSTALLATION

SEPTIC TANK SIZE <u>1000</u> gal.	STANDPIPE: () YES (X) NO	MANHOLE DEPTH <u>5'11"</u>	DEPTH BELOW GROUND SURFACE <u>3'</u>	ROCK UNDER PIPE <u>NA</u>
EFFECTIVE DISPOSAL AREA <u>413</u> sq. ft.	INSTALLATION APPROVED <input checked="" type="checkbox"/> DISAPPROVED _____	INSTALLER <u>Brent Miller</u>		INSTALLER # <u>920</u>

EHS SIGNATURE <u>Steve J. Row</u>	DATE	EHS # <u>69</u>
REMARKS <u>Infiltrator system (needs 700 sq ft to = 667 sq ft)</u>		

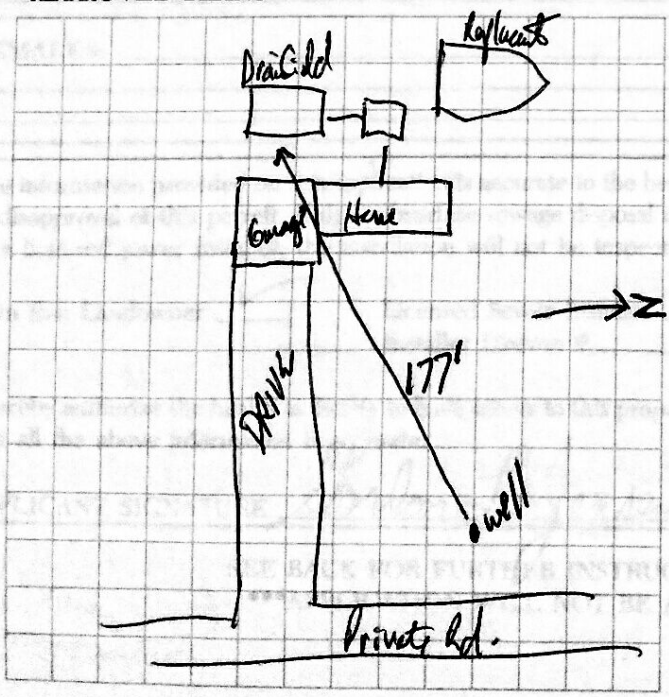
WATER SYSTEM

PLANS APPROVED YES <input checked="" type="checkbox"/> NO _____	SAMPLE COLLECTED BY	DATE	STATE LAB INDICATES INTESTINAL BACTERIA WERE _____ WERE NOT _____ FOUND
MIN. DISTANCES PER STANDARDS/REGS. YES _____ NO _____	CHEMICAL PARAMETERS TESTED WITHIN LIMITS YES _____ NO _____	SYSTEM PUBLIC _____ PRIVATE <input checked="" type="checkbox"/>	

WELL (SPRING) APPEARS TO MEET CONSTRUCTION STANDARDS AT TIME OF INSPECTION () YES () NO	EHS SIGNATURE	EHS #
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REMARKS NOT INSTALLED AT THIS TIME

APPROVED PLANS



AS BUILT PLANS

